Entry Blank—Please Type or Print Ms /Artist TYPREL LILIAN ☐ Mr./Artist 7908 St Rt 88 RAVAI Permanent Address 0H10 44266 Daytime Tel. (216) 296 3216. Temporary or Studio Address Street City Daytime Tel. (Zip area If you do not presently live in one of the counties of the Western Reserve, in which county were you born? DONNA HORS Collaborator (if any) If May Show entries are not accepted or are not sold: Artist will pick up at Museum. ☐ Museum should dispose of. ☐ Museum should ship to artist at artist's expense: Street State City Zip **Special Instructions** Entry Blank must be completed in full and signed; forms received unsigned will not be accepted. When necessary, include instructions or a drawing for assembling and displaying an object. Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until August 6, 1989. The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein. your Signature

I have received the unsold/unaccepted object(s) in good condition.

Signature

Entry Blanks

Detach entire portion along dotted line and submit with slides, but retain tags

☐ Paintings



☐ Photography

☐ Graphics

☐ Scul	pture 🕒 C	rafts	(spe	ecify category)
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